

- b. Licensure to practice medicine in the state where the institution that sponsors the program is located.
- c. Certification by the American Board of XX, or judged by the RRC to possess appropriate educational qualifications.

FOR A SUBSPECIALTY: Certification by the American Board of XX, or judged by the RRC to possess appropriate educational qualifications, and subspecialty certification in XX, judged by the RRC to possess appropriate educational qualifications.

- d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director

- a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and faculty. It should be readily available for review by the site visitor.
- b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
- c. Selection and supervision of the faculty and other program personnel at each institution participating in the program.
- d. Supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
- e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
- f. The program director, with faculty participation, shall
  - (1) at least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures;
  - (2) communicate each evaluation to the resident in a timely manner;

- (3) advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth;
  - (4) maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel; and
  - (5) provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
- g. Implement fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
  - h. Monitor resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and faculty should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Situations that consistently produce undesirable stress on residents must be evaluated and modified.
  - i. Prepare an accurate statistical and narrative description of the program as requested by a review committee.
  - j. Notify the RRC regarding major programmatic changes.

B. Faculty

In addition to the following requirements, the teaching staff must possess the same qualifications listed above for the program director.

- 1. There must be a sufficient number of faculty with documented qualifications to instruct and supervise adequately all the residents in the program. The faculty must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
- 2. All members of the faculty must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.